

CLAIMS ONLY							Application Number 10/657842		Filing Date				
							Applicant(s)						
							* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
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48							98						
49							99						
50							100						
Total Indep		6					Total Indep						
Total Depend		24					Total Depend						
Total Claims		30					Total Claims						